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IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF ALABAMA DIVISION

2006 NOV 20 A 10: 31

HAROLD M. ABRAHAMSED IR	U.S. DISTRICT COURT MIDDLE DISTRICT ALA
UNKNOWN THE DOES	2:06CV1039-WKW
Plaintiff(s)	
MONTGOMERY COUNTY (ETENTION) SHEARIFF DAVID THARSHAIL!	FARILITY (LT. FINLEY) LT. JENKINS
Defendant(s)	LOWS; LAT. KODGERS
	EED IN FORMA PAUPERIS

Plaintiff(s) HAROLD M. ABRAHAMSEN JR.

moves this Honorable Court for an order allowing her/him to proceed in this case without prepayment of fees, costs, or security therefor, and for grounds therefor submits the attached swom affidavit in support of the motion.

Plaintiff(s) signature

AO 240 (Rev. 10/03)	
UNITED STA	TES DISTRICT COURT RECEIVED
	District of MIDDLE HOUR BRANCH IN: 31
Plaintiff V.	APPLICATION TO PROCEED P. HACKETT, GLM WITHOUT PREPAYMENT OF E DISTRICT ALA, FEES AND AFFIDAVIT
	CASE NUMBER:
Defendant	
I, HAROLD M. ABRAHAMSEN 3	declare that I am the (check appropriate box)
petitioner/plaintiff/movant oth	er OTHER FOUN EJANE DOES
in the above-entitled proceeding; that in support of	of my request to proceed without prepayment of fees or costs pay the costs of these proceedings and that I am entitled to the relief
In support of this application, I answer the follow	ing questions under penalty of perjury:
	Yes ☐ No (If "No," go to Part 2)
If "Yes," state the place of your incarceration	
Are you employed at the institution? Attach a ledger sheet from the institution(s)	Do you receive any payment from the institution? No
transactions.	
2. Are you currently employed?	Yes Po
 a. If the answer is "Yes," state the amount of and address of your employer. 	of your take-home salary or wages and pay period and give the name
b. If the answer is "No," state the date of you and pay period and the name and address which free himself.	our last employment, the amount of your take-home salary or wages as of your last employer.
	ved any money from any of the following sources?
 a. Business, profession or other self-employ b. Rent payments, interest or dividends c. Pensions, annuities or life insurance pay d. Disability or workers compensation pay e. Gifts or inheritances f. Any other sources 	☐ Yes ☐ No ments ☐ Yes ☐ No
·	escribe, on the following page, each source of money and state the

amount received and what you expect you will continue to receive.

<u> </u>	
4.	Do you have any cash or checking or savings accounts?
	If "Yes," state the total amount.
	11 100, 0000 010 0000 0110 0110
_	The state of the s
5.	Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other
	thing of value?
	If "Yes," describe the property and state its value.
	11 105, dosonio did property and suite in the same
6.	List the persons who are dependent on you for support, state your relationship to each person and indicate
	how much you contribute to their support.
	a a company of the state of the
I de	clare under penalty of perjury that the above information is true and correct.
10.00	and the second of the second o
	. Annual Property (1/1) International Contraction of the Contraction o
j	1.16.2006 2/7/10/
	Date Signature of Applicant
	Date Signature of Applicant
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NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each

ACCOUNT.

REPOSE NOTE, THIS IS ONLY INSTITUTION, I'VE BEEN
IN, THEIR IS LITTLE TO NO CO-OPERATION WITH
STREEF HERE, TO OBTAIN AN AFFIDAULT OR STATEMENT
OF ANY KIND OF CERTIFICATION HOWER OVER DURASE · CONT

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